Drug Supply Chain Security Act Document Doc#00000013742

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (\$9676-\$

Reference Number: 01l30794

NDC: 59676-0562-01 Document Type: Invoice

Lot Number Quantity Unique Serial #
19NG777 1

Reference Date: 08/11/20

(TH) Transaction History

Manufacturer's Name: JANSSEN PRODUCTS

Manufacturer's information1000 U.S. ROUTE 202 SOUTH, RARITAN, NJ 08869

SOLD TO:		SHIPPED TO:
Name: INDEPENDENT PHARAMCY COOPERATIVE		Name: INDEPENDENT PHARAMCY COOPERATIVE
Address: 1550 COLUMBUS STREET		Address: 1550 COLUMBUS STREET
SUN PRAIRIE, WI 53590		SUN PRAIRIE, WI 53590
Date Purchased & Ref 05/19/20	PO#159706	Date Received & Ref 05/22/20
SOLD TO:		SHIPPED TO:
Name: LMP PHARMACY		Name: LMP PHARMACY
Address: 7535 MAIN STREET		Address: 7535 MAIN STREET
FLUSHING, NY 11367		FLUSHING, NY 11367
Date Purchased & Ref 06/01/20	PO#5265	Date Received & Ref: 06/01/20
SOLD TO:		SHIPPED TO:

SOLD TO:	SHIPPED TO:
Name: BNR WHOLESALER	Name: PUCCI'S PHARMACY
Address: 3858 NOSTRAND AVE.	Address: 2821 J ST

BROOKLYN, NY 11235 SACRAMENTO CA 95816

Date Purchased & Ref 06/05/20 PO#01A2608 Date Received & Ref: 06/05/20 PO#01A2608

SOLD TO:
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD. SUITE 11
REGO PARK, NY 11374

SHIPPED TO:
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD. SUITE 11
REGO PARK, NY 11374

Date Purchased & Ref 06/24/20 PO#01208419 | Date Purchased & Ref 06/29/20 PO#01208419

SOLD TO: || SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DRIVE
CAMBRIDGE, MD 21613

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DRIVE
CAMBRIDGE, MD 21613

Date Purchased & Ref 07/30/20 PO#9130 | Date Purchased & Ref 07/30/20 PO#9130

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.



Drug Supply Chain Security Act Document Doc#00000013742

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZISTA 600MG TAB 60CT, 600 mg/1, TABLET, FILM COATED, 60 TABLET, FILM COATED in 1 BOTTLE, PLASTIC (\$9676-

Reference Number: 01I30794

NDC: 59676-0562-01 Document Type:

Document Type: Invoice

Reference Date: 08/11/20

Lot Number	Quantity	Unique Serial #
19NG777	1	

(TH) Transaction History (Continued)

SOLD TO: Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Purchased & Ref 8/11/20 01S28778001	SHIPPED TO: Name: PUCCI'S PHARMACY Address: 2821 J ST SACRAMENTO CA 95816 Date Received & Ref: 8/11/20 01S28778001
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

Reference Date:

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT, 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

01132699 30 TABLET, FILM COATED in 1 BOTTLE **Reference Number:**

INVOICE **Document Type:** NDC: 59676-0800-30 09/10/2020

Lot Number Quantity **Unique Serial #** 20EG062 3 20GG131 2 20AG853X

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

Name: Independent Pharmacy Cooperative 1550 Columbus Street

1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/29/20 07/29/20 PO#160125

SOLD TO: SHIPPED TO:

Name: **StainRx** StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave

Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3523 08/18/20 Date Received & Ref: 08/18/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler** Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave

Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/30/20 08/30/20 PO#01A2861

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/09/20 09/09/20 PO#01209667

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/10/20 09/10/20 PO#9273

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

30 TABLET, FILM COATED in 1 BOTTLE Reference Number:

NDC: 59676-0800-30 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 20EG062
 3

 20GG131
 2

 20AG853X
 1

Reference Date: 09/10/2020

01132699

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	
Address:	Name: Address:
Address.	Address.
Date Purchased & Ref :	Date Received & Ref :
Date i dioliasca a itel .	Date Received & Ref .
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	
	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT, 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

01132699 30 TABLET, FILM COATED in 1 BOTTLE **Reference Number:**

INVOICE **Document Type:** NDC: 59676-0800-30

Lot Number Quantity **Unique Serial #** 19MG726 9

09/10/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/30/20 07/30/20 PO#160129

SOLD TO: SHIPPED TO:

Name: **StainRx** StainRx Name: Address:

807 Stanley Ave Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3529 08/21/20 Date Received & Ref: 08/21/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler** Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave

Brooklyn, NY 11235 Brooklyn, NY 11235 Date Purchased & Ref: Date Received & Ref: 08/28/20 08/28/20 PO#01A2849

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/09/20 09/09/20 PO#01209667

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/10/20 09/10/20 PO#9273

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

30 TABLET, FILM COATED in 1 BOTTLE Reference Number: 01I32699

NDC: 59676-0800-30

Lot Number | Quantity | Unique Serial # | Document Type: | INVOICE | 09/10/2020

Lot NumberQuantityUnique Serial #19MG7269

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01\$29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Data Danaiwad & Bat .
Date Fulchased & Nei .	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132699 **Reference Number:**

Document Type:

INVOICE 09/10/2020

NDC: 61958-2501-01

Lot Number Quantity **Unique Serial # CCZBZA** 3 **CDFXXA** 7 **CCZBWA** 4

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 Wheeler Avenue, La Verne, CA 91750

SOLD TO:

Independent Pharmacy Cooperative

Name: Address:

1550 Columbus Street

Sun Prairie, WI 53590

SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Reference Date:

Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/28/20 07/28/20 PO#160120

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

08/14/20

08/26/20

PO#1SN3519

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 08/14/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

PO#01A2835

PO#01209667

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 08/26/20

SOLD TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref: 09/09/20 SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 REGO PARK, NY 11374

Date Received & Ref: 09/09/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01

Document Type: ____
Reference Date:

INVOICE 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 CCZBZA
 3

 CDFXXA
 7

 CCZBWA
 4

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
	Date Neceived & Nei .
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
24.0 1 4.01.4004 4.1011	Date Received & Ref.
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Data Durahasad & Dat .	Data Bassinad 9 Bat .
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132699 **Reference Number:**

Document Type: NDC: 61958-2501-01

INVOICE

Reference Date:

09/10/2020

Lot Number	Quantity	Unique Serial #
CDGWYA	1	
CCZCFA	3	
022534	1	

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 Wheeler Avenue, La Verne, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative 1550 Columbus Street

1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/31/20 07/31/20 PO#160135

SOLD TO: SHIPPED TO:

Name: **StainRx** StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3523 08/18/20 Date Received & Ref: 08/18/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler** Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/25/20 08/25/20 PO#01A2828

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/09/20 09/09/20 PO#01209667

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/10/20 09/10/20 PO#9273

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132699 Reference Number:

NDC: 61958-2501-01

INVOICE **Document Type: Reference Date:** 09/10/2020

Quantity Unique Serial # Lot Number **CDGWYA** 3 **CCZCFA** 022534

(TH) Transaction History

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/10/20 01529942004	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type: INV

Document Type: INVOICE

Reference Date: 09/10/2020

Lot Number	Quantity	Unique Serial #
CDFYDA	3	
CCZCBA	1	
CDFXYA	2	

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 Wheeler Avenue, La Verne, CA 91750

Wallulacturer S Illiorillation 1000 Wheeler Avenue, La Verne, CA 517	
SOLD TO:	SHIPPED TO:
Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590	Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590
Date Purchased & Ref : 07/21/20 PO#160086	Date Received & Ref: 07/21/20
SOLD TO: Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207	SHIPPED TO: Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207
Date Purchased & Ref: 08/12/20 PO#1SN3515	Date Received & Ref : 08/12/20
SOLD TO: Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235	SHIPPED TO: Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235
Date Purchased & Ref: 08/21/20 PO#01A2802	Date Received & Ref: 08/21/20
SOLD TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374	SHIPPED TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374
Date Purchased & Ref : 09/09/20 PO#01209667	Date Received & Ref: 09/09/20
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613
Date Purchased & Ref: 09/10/20 PO#9273	Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Typ

Document Type: INVOICE

Reference Date: 09/10/2020

Lot Number	Quantity	Unique Serial #
CDFYDA	3	
CCZCBA	1	
CDFXYA	2	

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	
01323342004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Data Burahasad & Data	
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Addition.	Tradition.
Date Purchased & Ref :	Date Received & Ref :
COLD TO	CUIDDED TO:
SOLD TO: Name:	SHIPPED TO:
Address:	Name: Address:
Audiess.	Audress.
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132699 **Reference Number:**

Reference Date:

Document Type: NDC: 61958-2501-01

INVOICE 09/10/2020

Lot Number Quantity Unique Serial # 6341502A 1 **CCZCCA** 1 6341501A

(TH) Transaction History

Name:

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 Wheeler Avenue, La Verne, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/29/20 07/29/20 PO#160125

SOLD TO: SHIPPED TO:

Name: StainRx StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3527 08/20/20 Date Received & Ref: 08/20/20

SOLD TO: SHIPPED TO:

BNR Wholesaler Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/24/20 08/24/20 PO#01A2820

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/09/20 09/09/20 PO#01209667

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/10/20 09/10/20 PO#9273

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01

Document Type: INVOICE
Reference Date: 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 6341502A
 1

 CCZCCA
 1

 6341501A
 1

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	
01323342004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Data Burahasad & Data	
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Addition.	Tradition.
Date Purchased & Ref :	Date Received & Ref :
COLD TO	CUIDDED TO:
SOLD TO: Name:	SHIPPED TO:
Address:	Name: Address:
Audiess.	Audress.
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Reference Numb

INVOICE

 Lot Number
 Quantity
 Unique Serial #

 CCZCDA
 1

 CDFYFA
 1

Reference Date: 09/10/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 Wheeler Avenue, La Verne, CA 91750

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/29/20 PO#160125 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/17/20 PO#1SN3521 Date Received & Ref: 08/17/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave
Address: 3858 Nostrand Ave
Address: 3858 Nostrand Ave

Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: 08/26/20 PO#01A2835 Date Received & Ref: 08/26/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

REGO FARR, NT 115/4

Date Purchased & Ref: 09/09/20 PO#01209667 Date Received & Ref: 09/09/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 | Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	
	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	····· == · · ·
	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 PL3D
 2

 VW6H
 1

 PG9F
 2

Reference Date: 09/08/2020

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/22/20 PO#160092 Date Received & Ref: 07/22/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/12/20 PO#1SN3515 Date Received & Ref: 08/12/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave Brooklyn, NY 11235

Name: BNR Wholesaler
Address: 3858 Nostrand Ave Brooklyn, NY 11235

Date Purchased & Ref: 08/24/20 PO#01A2820 Date Received & Ref: 08/24/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/02/20 PO#01209608 | Date Received & Ref: 09/02/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 PO#9268 Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01l32561

NDC: 49702-0231-13

Document Type: INVOICE

Lot Number Quantity Unique Serial # Reference Date: 09/08/2020

 Lot Number
 Quantity
 Unique Serial #

 PL3D
 2

 VW6H
 1

 PG9F
 2

(TH) Transaction History (Cont.)

SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/08/20 01S29942002
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 KD2R
 1

 X46V
 1

 V59A
 1

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/29/20 PO#160125 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/10/20 PO#1SN3510 Date Received & Ref: 08/10/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/21/20 PO#01A2802

Date Received & Ref: 08/21/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/02/20 PO#01209608 | Date Received & Ref: 09/02/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 PO#9268 Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

09/08/2020

Reference Date:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01l32561

NDC: 49702-0231-13 Document Type: INVOICE

Lot Number	Quantity	Unique Serial #
KD2R	1	
X46V	1	
V59A	1	

Reference Date: 09/08/2020

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/08/20 01S29942002	Date Received & Ref : 09/08/20 01S29942002
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Name: Address:
Address.	Address.
Date Purchased & Ref :	Date Received & Ref :
Date Fall-massa & Not .	Date Neceived & Net .
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
	1
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 WE7K
 1

 SE9Y
 1

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street

Address: 1550 Columbus Street

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref : 07/23/20 PO#160098 | Date Received & Ref : 07/23/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/07/20 PO#1SN3508 Date Received & Ref: 08/07/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/25/20 PO#01A2828

Brooklyn, NY 11235

Date Received & Ref: 08/25/20

SOLD TO: | SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/02/20 PO#01209608 | Date Received & Ref: 09/02/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 PO#9268 Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

09/08/2020

Reference Date:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01l32561

NDC: 49702-0231-13 Document Type: INVOICE

Lot Number	Quantity	Unique Serial #
WE7K	1	
SE9Y	1	

Reference Date: 09/08/2020

(TH) Transaction History (Cont.)

SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/08/20 01S29942002 SHIPPED TO:
Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Pate Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address:
la Na

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT, 200; 25; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132561 **Reference Number:**

Sun Prairie, WI 53590

INVOICE **Document Type:** NDC: 61958-2101-01

Lot Number Quantity **Unique Serial #** 020236 2 020236 2

09/08/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information wheeler ave LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/24/20 07/24/20 PO#160103

SOLD TO: SHIPPED TO:

Name: StainRx StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3517 08/13/20 Date Received & Ref: 08/13/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler** Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235

Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/20/20 08/20/20 PO#01A2798

SOLD TO: SHIPPED TO: Name:

BOULEVARD 9229 LLC Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/02/20 09/02/20 PO#01209608

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/08/20 09/08/20 PO#9268

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: ODEFSEY TAB 30CT, 200; 25; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132561 **Reference Number:** INVOICE **Document Type:**

NDC: 61958-2101-01

Quantity Unique Serial # Lot Number 020236 2 2 020235

Reference Date: 09/08/2020

(TH) Transaction History (Cont.)

	-
SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/08/20 01S29942002	Date Received & Ref : 09/08/20 01S29942002
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
2012-2	
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	
	Name:
Address:	Address:
Data Dunck and 9 Date	Data Danahur d & Batis
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial #** 19GV022UA

Reference Number: 01132431

Document Type:

Reference Date:

INVOICE

09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

07/23/20

07/28/20

08/03/20

SOLD TO:

Name: **Independent Pharmacy Cooperative**

Address:

1550 Columbus Street

Date Purchased & Ref:

Sun Prairie, WI 53590

PO#160098

SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: 07/23/20

StainRx

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

Name:

Address:

SHIPPED TO:

807 Stanley Ave Brooklyn, NY 11207

Date Received & Ref: 07/28/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

PO#01A2759

PO#1SN3490

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 08/03/20

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 08/06/20 08/06/20 PO#01209190

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582; (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng	, ,	ontainer Size:			
GENVOYA TAB 300	31		Reference Number:	01l32431	
NDC: 61958-1901-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
19GV022UA	1				

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC Address:5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	Name: OLYMPIA PLAZA PHARMACY INC Address ₇₉₀₁ W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial # CCXCVA**

Reference Number: 01132431

Document Type: Reference Date:

INVOICE 09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO:

Name: **Independent Pharmacy Cooperative**

Address:

Name:

1550 Columbus Street

Sun Prairie, WI 53590

07/17/20 PO#160079 SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: 07/17/20

SOLD TO:

StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

Date Purchased & Ref:

07/24/20

PO#1SN3485

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 07/24/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

Date Purchased & Ref:

08/04/20

PO#01A2763

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 08/04/20

SOLD TO:

Name:

Address: 9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

BOULEVARD 9229 LLC

08/06/20

PO#01209190

SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 08/06/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;

PO#9255

- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strei	ngth, Dosage Form	n, Container Size:		
GENVOYA TAB 3	0СТ		Reference Number:	01 32431
NDC: 61958-1901-0 ⁻	1		Document Type:	INVOICE
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020
CCXCVA	1			

(TH) Transaction History

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial #** 020717 1

Reference Number: 01132431

Document Type: 09/01/2020 Reference Date:

INVOICE

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/09/20 07/09/20 PO#160048

SOLD TO: SHIPPED TO:

Name: StainRx StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3492 07/29/20 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler** Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave

Brooklyn, NY 11235 Brooklyn, NY 11235 Date Purchased & Ref: Date Received & Ref: 08/03/20 08/03/20 PO#01A2759

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 08/05/20 08/05/20 PO#01209165

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/01/20 09/01/20 PO#9255

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng	gth, Dosage Form, C	ontainer Size:			
GENVOYA TAB 30	СТ		Reference Number:	01 32431	
NDC: 61958-1901-01			Document Type: _	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
020717	1				

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref : 9/4/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity Unique Serial #
19GV020UA 1

Reference Number: 01l32431

Document Type: INVOICE
Reference Date: 09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/10/20 PO#160052 Date Received & Ref: 07/10/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 07/21/20 PO#1SN3478 Date Received & Ref: 07/21/20

SOLD TO: | SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 07/30/20 PO#01A2752

Date Received & Ref: 07/30/20

SOLD TO: | SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 08/04/20 PO#01209134 | Date Received & Ref: 08/04/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng		ontainer Size:			
GENVOYA TAB 300	<i>3</i> I		Reference Number:	01l32431	
NDC: 61958-1901-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
19GV020UA	1				

(TH) Transaction History

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

HARVONI TAB 90/400MG 28CT

NDC: 61958-1801-01

NDO. 01330-1001-01		
Lot Number	Quantity	Unique Serial #
012062	1	
015550	1	

Reference Number: 01132499

INVOICE **Document Type:**

Reference Date: 09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO:

Name: **Independent Pharmacy Cooperative** 1550 Columbus Street

Address:

Sun Prairie, WI 53590

07/29/20

SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/13/20 07/13/20 PO#160057

SOLD TO:

Name: **StainRx**

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

PO#1SN3483 07/23/20

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 07/23/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

PO#01A2744

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 07/29/20

SOLD TO:

Name: **BOULEVARD 9229 LLC**

Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO: Name:

BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 08/06/20 08/06/20 PO#01209190

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582; (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: HARVONI TAB 90/400MG 28CT NDC: 61958-1801-01		Reference Number: _ Document Type: _	01l32499 INVOICE		
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
012062	1				
015550	1				

(TH) Transaction History (Cont.)

SOLD TO: Name: SYNERGEN BY LLC	SHIPPED TO: Name: SYNERGEN RX LLC
Address: 3990 FLOWERS RD. STE 530	Name: SYNERGEN RX LLC Address: 3990 FLOWERS RD. STE 530
DORAVILLE, GA 30360 Date Purchased & Ref: 9/8/20 01S30198001	DORAVILLE, GA 30360 Date Purchased & Ref: 9/8/20 01S30198001
SOLD TO: Name:	SHIPPED TO:
Address:	Name: Address:
7.44.1.0001	7.44.0001
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT, 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

30 TABLET, FILM COATED in 1 BOTTLE Reference Number:

NDC: 59676-0800-30

Lot Number | Quantity | Unique Serial # | Reference Date: 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 20EG062
 3

 20GG131
 2

 20AG853X
 1

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street
Sun Prairie, WI 53590

Address: 1550 Columbus Street
Sun Prairie, WI 53590

Address: 1550 Columbus Street
Sun Prairie, WI 53590

Date Purchased & Ref : 07/29/20 PO#160125 Date Received & Ref : 07/29/20

SOLD TO:

Name: StainRx StainRx

Name: StainRx

Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx

Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/18/20 PO#1SN3523 Date Received & Ref: 08/18/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/30/20 PO#01A2861

Brooklyn, NY 11235

Date Received & Ref: 08/30/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/09/20 PO#01209667 | Date Received & Ref: 09/09/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

01132699

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT , 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

30 TABLET, FILM COATED in 1 BOTTLE Reference Number: 01l32699

NDC: 59676-0800-30

Lot Number | Quantity | Unique Serial # | Reference Date: 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 20EG062
 3

 20GG131
 2

 20AG853X
 1

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/10/20 01S29942004	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/10/20 01S29942004
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 30CT, 800; 150; 200; 10 mg/1; mg/1; mg/1; mg/1, TABLET, FILM COATED

01132699 30 TABLET, FILM COATED in 1 BOTTLE **Reference Number:**

INVOICE **Document Type:** NDC: 59676-0800-30

Lot Number Quantity **Unique Serial #** 19MG726 9

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

Name: Independent Pharmacy Cooperative 1550 Columbus Street 1550 Columbus Street Address:

Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/30/20 07/30/20 PO#160129

SOLD TO: SHIPPED TO:

Name: StainRx StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3529 08/21/20 Date Received & Ref: 08/21/20

SOLD TO: SHIPPED TO: Name:

BNR Wholesaler Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/28/20 08/28/20 PO#01A2849

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/09/20 09/09/20 PO#01209667

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/10/20 09/10/20 PO#9273

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

09/10/2020

Reference Date:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng	th, Dosage Form, C	Container Size:		
SYMTUZA 30CT, 800; 150; 200; 10 mg/1; mg/1; mg/1, TABLET, FILM COATED 30 TABLET, FILM COATED in 1 BOTTLE Reference Number: 01I326				01l32699
NDC: 59676-0800-30		Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/10/2020
19MG726	9			

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/10/20 01S29942004	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/10/20 01S29942004
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132699 Reference Number:

Reference Date:

Document Type: NDC: 61958-2501-01

INVOICE 09/10/2020

Lot Number	Quantity	Unique Serial #
CCZBZA	3	
CDFXXA	7	
CCZBWA	4	

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 Wheeler Avenue, La Verne, CA 91750

Manufacturer 5 information1999 Wheeler Avenue, Ea verne, OA 97799		
SOLD TO: Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590	SHIPPED TO: Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590	
Date Purchased & Ref : 07/28/20 PO#160120	Date Received & Ref: 07/28/20	
SOLD TO: Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207	SHIPPED TO: Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207	
Date Purchased & Ref: 08/14/20 PO#1SN3519	Date Received & Ref : 08/14/20	
SOLD TO: Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235 Date Purchased & Ref: 08/26/20 PO#01A2835	SHIPPED TO: Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235 Date Received & Ref: 08/26/20	
SOLD TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374 Date Purchased & Ref: 09/09/20 PO#01209667	SHIPPED TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374 Date Received & Ref: 09/09/20	
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref: 09/10/20 PO#9273	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref: 09/10/20	
Date Purchased & Ref: 09/10/20 PO#9273	Date Neceived & Net . 09/10/20	

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;

- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01

Document Type:
Reference Date:

INVOICE 09/10/2020

Lot NumberQuantityUnique Serial #CCZBZA3CDFXXA7CCZBWA4

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	
Address:	Name: Address:
Address.	Address.
Date Purchased & Ref :	Date Received & Ref :
Date i dioliasca a itel .	Date Received & Ref .
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	
	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type:

Document Type: INVOICE

Reference Date: 09/10/2020

Lot Number	Quantity	Unique Serial #
CDGWYA	1	
CCZCFA	3	
022534	1	

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 Wheeler Avenue, La Verne, CA 91750

Manufacturer 5 Information1000 wheeler Avenue, ca verie, ca 97730			
SOLD TO:	SHIPPED TO:		
Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590	Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590		
Date Purchased & Ref : 07/31/20 PO#160135	Date Received & Ref: 07/31/20		
SOLD TO:	SHIPPED TO:		
Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207	Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207		
Date Purchased & Ref: 08/18/20 PO#1SN3523	Date Received & Ref: 08/18/20		
SOLD TO:	SHIPPED TO:		
Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235	Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235		
Date Purchased & Ref: 08/25/20 PO#01A2828	Date Received & Ref: 08/25/20		
SOLD TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374	SHIPPED TO: Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374		
Date Purchased & Ref : 09/09/20 PO#01209667	Date Received & Ref: 09/09/20		
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613		
Date Purchased & Ref: 09/10/20 PO#9273	Date Received & Ref: 09/10/20		

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type:

Lot Number | Quantity | Unique Serial # Reference Date:

INVOICE 09/10/2020

Lot Number	Quantity	Unique Serial #
CDGWYA	1	
CCZCFA	3	
022534	1	

(TH) Transaction History

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref: 09/10/20 01S29942004
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 CDFYDA
 3

 CCZCBA
 1

 CDFXYA
 2

Reference Date: 09/10/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 Wheeler Avenue, La Verne, CA 91750

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/21/20 PO#160086 Date Received & Ref: 07/21/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/12/20 PO#1SN3515 Date Received & Ref: 08/12/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/21/20 PO#01A2802

Date Received & Ref: 08/21/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/09/20 PO#01209667 | Date Received & Ref: 09/09/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Typ

Document Type: INVOICE
Reference Date: 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 CDFYDA
 3

 CCZCBA
 1

 CDFXYA
 2

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
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- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type: INVOICE

Reference Date: 09/10/2020

 Lot Number
 Quantity
 Unique Serial #

 6341502A
 1

 CCZCCA
 1

 6341501A
 1

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 Wheeler Avenue, La Verne, CA 91750

SOLD TO:
Name: Independent Pharmacy Cooperative SHIPPED TO:
Name:

Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street

Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street

Address: 1550 Columbus Street | Address: 1550 Columbus Street | Sun Prairie, WI 53590 | Sun Prairie, WI 53590 | Sun Prairie, WI 53590

Date Purchased & Ref: 07/29/20 PO#160125 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/20/20 PO#1SN3527 Date Received & Ref: 08/20/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave
Address: 3858 Nostrand Ave
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/24/20 PO#01A2820

Brooklyn, NY 11235

Date Received & Ref: 08/24/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

REGULARIA, NT 11374

 Date Purchased & Ref :
 09/09/20
 PO#01209667
 Date Received & Ref :
 09/09/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

822 CHESAPEAKE DR
CAMBRIDGE MD 21613

Address: 822 CHESAPEAKE DR
CAMBRIDGE MD 21613

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01

Document Type:

INVOICE

 Lot Number
 Quantity
 Unique Serial #

 6341502A
 1

 CCZCCA
 1

 6341501A
 1

Reference Date: 09/10/2020

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103	Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

Reference Number: 01l32699

NDC: 61958-2501-01 Document Type:

Document Type: INVOICE
Reference Date: 09/10/2020

Lot Number	Quantity	Unique Serial #
CCZCDA	1	
CDFYFA	1	

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 Wheeler Avenue, La Verne, CA 91750

SOLD TO:
Name: Independent Pharmacy Cooperative SHIPPED TO:
Name:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Address: 1550 Columbus Street

Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Purchased & Ref: 07/29/20 PO#160125 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/17/20 PO#1SN3521 Date Received & Ref: 08/17/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/26/20 PO#01A2835

Brooklyn, NY 11235

Date Received & Ref: 08/26/20

1 GRUTALOO

SOLD TO:
Name: BOULEVARD 9229 LLC
Name: BOULEVARD 9229 LLC

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/09/20 PO#01209667 Date Received & Ref: 09/09/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

PSS: 822 CHESAPEAKE DR Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613

Date Purchased & Ref: 09/10/20 PO#9273 Date Received & Ref: 09/10/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

BIKTARVY 30CT, 50; 200; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC
Reference Number:
Document Type:

INVOICE

CCZCDA

1

Doyl10/2020

(TH) Transaction History (Cont.)

1

CDFYFA

SOLD TO:	SHIPPED TO:	
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W	
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103	
LOS ANGELES CA 90036	LOS ANGELES CA 90036	
Date Purchased & Ref : 09/10/20 01S29942004	Date Received & Ref : 09/10/20 01S29942004	
SOLD TO:	SHIPPED TO:	
Name:	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO:	SHIPPED TO:	
Name:		
	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO:	SHIPPED TO:	
Name:	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO:	SHIPPED TO:	
Name:	····· == · · ·	
	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document Doc#00000015090

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG Reference Number: NDC: 61958-2002-01 Document Type:

Document Type: Invoice

Reference Date: 09/04/20

01132431

Lot Number Quantity Unique Serial # 021088 17

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information NO WHEELER AVE LA VERNE CA 91750

manufacturer's information 800 WHEELER AVE LA VERNE,	CA 91750
SOLD TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Purchased & Ref :7/24/20 114185	SHIPPED TO: Name: DROGUERIA BETANCES Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 Date Received & Ref : 7/24/20 114185
SOLD TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Purchased & Ref: 08/03/20 851039	SHIPPED TO: Name: GENTEK LLC Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 Date Received & Ref: 8/3/20 851039
SOLD TO: Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Purchased & Ref: 08/07/20 PO#01209221	SHIPPED TO: Name: SAFE CHAIN SOLUTIONS Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Date Received & Ref: 08/12/20 RC#013601
SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/04/20 01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/04/20 01S30114001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Page: 1 of 1 pages.

Unique Serial #

Drug Supply Chain Security Act Document Doc#00000015200

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG

NDC: 61958-2002-01

Lot Number Quantity

021086 1 021087 6 021596 13 Reference Number: _

01I32431 Invoice

Document Type: Reference Date:

09/04/20

114185

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:
Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725
Date Purchased & Ref 7/24/20

SHIPPED TO:
Name: DROGUERIA BETANCES
Address: LUIS MUNOZ MARIN AVE
CAGUAS PR 00725
Date Received & Ref 7/24/20

SOLD TO:
Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

SHIPPED TO:
Name: GENTEK LLC
Address: 45 CEDAR ST UNIT 3
STAMFORD CT 06902

STAMFORD CT 06902

Date Purchased & Ref: 08/03/20 851039 Date Received & Ref: 8/3/20 851039

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS
Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613 CAMBRIDGE MD 21613

Date Purchased & Ref: 08/07/20 PO#01209222 | Date Received & Ref: 08/17/20 RC#013661

SOLD TO:

Name: OLYMPIA PLAZA PHARMACY INC

Name: OLY

Name: OLYMPIA PLAZA PHARMACY INC
Address: 5901 W OLYMPIC BLVD STE 103

Name: OLYMPIA PLAZA PHARMACY INC
Address: 5901 W OLYMPIC BLVD STE 103

LOS ANGELES CA 90036 LOS ANGELES CA 90036

Date Purchased & Ref: 09/04/20 01S30114001 | Date Received & Ref: 09/04/20 01S30114001

SOLD TO:
Name:
Address:

Date Purchased & Ref :

SHIPPED TO:
Name:
Address:

Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document Doc#00000015200

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

DESCOVY TAB 30CT,

200/25MG Reference Number: 01l32431
NDC: 61958-2002-01 Document Type: Invoice

 NDC: 61958-2002-01
 Document Type:
 Invoice

 Lot Number
 Quantity
 Unique Serial #
 Reference Date:
 09/04/20

 6425304A
 13
 09/04/20
 09/04/20

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information:800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: SHIPPED TO: Name: **DROGUERIA BETANCES DROGUERIA BETANCES** Address: LUIS MUNOZ MARIN AVE Address: LUIS MUNOZ MARIN AVE CAGUAS PR 00725 **CAGUAS PR 00725** Date Purchased & Ref 7/24/20 Date Received & Ref :7/24/20 114185 114185 SOLD TO: SHIPPED TO: Name: **GENTEK LLC GENTEK LLC** Name: Address: 45 CEDAR ST UNIT 3 Address: 45 CEDAR ST UNIT 3 STAMFORD CT 06902 STAMFORD CT 06902 851039 Date Purchased & Ref: 08/03/20 Date Received & Ref: 8/3/20 851039 SOLD TO: SHIPPED TO: Name: SAFE CHAIN SOLUTIONS, LLC SAFE CHAIN SOLUTIONS Name: Address: 822 CHESAPEAKE DR Address: 822 CHESAPEAKE DR **CAMBRIDGE MD 21613 CAMBRIDGE MD 21613** Date Received & Ref: 08/17/20 RC#013661 Date Purchased & Ref: 08/07/20 PO#01209222 SOLD TO: SHIPPED TO: Name: **OLYMPIA PLAZA PHARMACY INC OLYMPIA PLAZA PHARMACY INC** Name: Address: 5901 W OLYMPIC BLVD STE 103 Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 **LOS ANGELES CA 90036** Date Purchased & Ref: 09/04/20 01S30114001 Date Received & Ref: 09/04/20 01S30114001 SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document Doc#00000015544

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT, 600; 200; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLA

Reference Number: 01l32431

NDC: 15584-0101-01 Document Type: Invoice

Lot Number Quantity Unique Serial # 016332 1

Reference Date: 09/04/20

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information 800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO:
Name: INDEPENDENT PHARMACY COOPERATIVE
Name: INDEPENDENT PHARMACY COOPERATIVE
Name: INDEPENDENT PHARMACY COOPERATIVE

Address: 1500 COLUMBUS STREET
SUN PRAIRIE, WI 53590

Address: 1500 COLUMBUS STREET
SUN PRAIRIE, WI 53590

SUN PRAIRIE, WI 53590

Date Purchased & Ref 5/6/20 PO#159652 Date Purchased & Ref : 5/6/20 PO#159652

SOLD TO:
Name: STAINRX

SHIPPED TO:
Name: STAINRX

Address: 807 STANLEY AVENUE

BROOKLYN, NY 11207

Rame: STAINRX

Address: 807 STANLEY AVENUE

BROOKLYN, NY 11207

Date Purchased & Ref 5/18/20 PO#1SN3315 Date Purchased & Ref : 5/18/20 PO#1SN3315

SOLD TO: SHIPPED TO:

Name: BNR WHOLESALER
Address: 3858 NOSTRAND AVENUE

Name: BNR WHOLESALER
Address: 3858 NOSTRAND AVENUE

BROOKLYN, NY 11235 BROOKLYN, NY 11235

Date Purchased & Ref: 05/22**/20** PO#01A2566 Date Purchased & Ref: 05/22/20 **01S30114001**

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD
REGO PARK NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD
REGO PARK NY 11374

Date Purchased & Ref 5/27/20 PO#01208268 Date Purchased & Ref 06/08/20 PO#01208268

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC
Address: 822 CHESAPEAKE DR

Name: SAFE CHAIN SOLUTIONS
Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613 CAMBRIDGE MD 21613

Date Purchased & Ref: 07/31/20 PO#01209513 Date Received & Ref: 07/31/20 RC#013890

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 1 pages.

Drug Supply Chain Security Act Document Doc#00000015544

(TI) Transaction Information

			BLET, FILM COATED, 30 TABLET Reference Number: Document Type:		n 1 BOTTL	E, PL
Lot Number	Quantity	Unique Serial #	Reference Date:	09/04/20		
016332	1					

(TH) Transaction History (Continued)

SOLD TO:	SHIPPED TO:	
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC	
Address: 5901 W OLYMPIC BLVD STE 103	Address: 5901 W OLYMPIC BLVD STE 103	
LOS ANGELES CA 90036	LOS ANGELES CA 90036	
Date Purchased & Ref : 09/04/20 01S30114001	Date Received & Ref : 09/04/20 01S30114001	
SOLD TO:	SHIPPED TO:	
Name:	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO:	SHIPPED TO:	
Name:	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
2012		
SOLD TO:	SHIPPED TO:	
Name:	Name:	
Address:	Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO:	SHIPPED TO:	
Name:	•••••	
Address:	Name:	
Address:	Address:	
Data David and La Dat	Dec Book 10 By	
Date Purchased & Ref :	Date Received & Ref :	

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT

NDC: 15584-0101-01

Lot Number Quantity **Unique Serial #** 1 015850

01132431 Reference Number:

INVOICE **Document Type:** 07/31/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street Address:

Sun Prairie, WI 53590

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 05/11/20 05/01/20 PO#159632

SOLD TO:

Name: LMP Pharmacy

Address: 7535 Main Str

Flushing, NY 11367

Date Purchased & Ref: 05/26/20 SHIPPED TO:

LMP Pharmacy Name: 7535 Main Str Address:

Flushing, NY 11367

Date Received & Ref: 05/26/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

SHIPPED TO:

BNR Wholesaler Name: Address:

3858 Nostrand Ave

Brooklyn, NY 11235

06/05/20 06/05/20 Date Received & Ref: PO#01A2608

PO#5248

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

06/10/20 Date Purchased & Ref: PO#01208543 SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 06/24/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 07/31/20 PO#9134 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 07/31/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

of 2 Page: 1 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng		Container Size:			
			Reference Number:	01132431	
NDC: 15584-0101-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	07/31/2020	
015850	1			_	

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/04/20 01S30114001	Date Received & Ref : 09/04/20 01S30114001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref: 06/05/20 PO#01A2608	Date Received & Ref: 06/05/20
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT

NDC: 15584-0101-01

Lot Number Quantity **Unique Serial #** 1 016666

01132431 Reference Number:

INVOICE **Document Type:** 07/29/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Purchased & Ref: 05/05/20 PO#159649 Name:

Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: 05/08/20

SOLD TO:

Name: LMP Pharmacy

Address: 7535 Main Str

Flushing, NY 11367

Date Purchased & Ref: PO#5254 05/29/20

SHIPPED TO:

LMP Pharmacy Name: 7535 Main Str Address:

Flushing, NY 11367

Date Received & Ref: 05/29/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

SHIPPED TO:

BNR Wholesaler Name:

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

06/02/20 06/02/20 Date Received & Ref: PO#01A2597

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

06/10/20 Date Received & Ref: 06/26/20 PO#01208593

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 07/29/20 PO#9125 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 07/29/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 1 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Stren ATRIPLA TAB 300	• •	, Container Size:			
			Reference Number:	01132431	
NDC: 15584-0101-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	07/29/2020	
016666	1]	_	
			7		
]		

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/04/20 01830114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/04/20 01830114001	
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:	
Date Purchased & Ref :	Date Received & Ref :	
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:	
Date Purchased & Ref :	Date Received & Ref :	

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT

NDC: 15584-0101-01

Lot Number Quantity **Unique Serial #** 1 016666

01132431 Reference Number:

INVOICE **Document Type:** 07/29/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street

Address: Sun Prairie, WI 53590

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 05/08/20 05/05/20 PO#159649

SOLD TO:

Name: LMP Pharmacy

Address: 7535 Main Str

Flushing, NY 11367

Date Purchased & Ref: PO#5254 05/29/20

SHIPPED TO:

LMP Pharmacy Name: 7535 Main Str Address:

Flushing, NY 11367

Date Received & Ref: 05/29/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

SHIPPED TO:

BNR Wholesaler Name: Address:

3858 Nostrand Ave

Brooklyn, NY 11235

06/02/20 06/02/20 Date Received & Ref: PO#01A2597

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

06/10/20 Date Purchased & Ref:

SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 06/26/20 PO#01208593

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 07/29/20 PO#9125 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613**

Date Received & Ref: 07/29/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 1 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Stren	•	n, Container Size:			
			Reference Number:	01132431	
NDC: 15584-0101-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	07/29/2020	
016666	1				

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/04/20 01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/04/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Data Based at 10 Bas
Date Fulchased & Rel .	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	
	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
Date i dionasca a itel .	Date Neceived & Net :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
714410001	7.1441.4441
Data Bunch and 6 Data	Data Bassinad & Bata
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 PL3D
 2

 VW6H
 1

 PG9F
 2

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street

Address: 1550 Columbus Street

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Purchased & Ref: 07/22/20 PO#160092 Date Received & Ref: 07/22/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 08/12/20 PO#1SN3515 Date Received & Ref: 08/12/20

SOLD TO:
Name: BNR Wholesaler SHIPPED TO:
Name: BNR Wholesaler

Address: BNR Wholesaler

Address: 3858 Nostrand Ave
Brooklyn, NY 11235

Name: BNR Wholesaler

Address: 3858 Nostrand Ave
Brooklyn, NY 11235

Date Purchased & Ref : 08/24/20 PO#01A2820 Date Received & Ref : 08/24/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC

Address: 9229 QUEENS BLVD STE 11
REGO PARK, NY 11374

Date Purchased & Ref: 09/02/20 PO#01209608 | Date Received & Ref: 09/02/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 PO#9268 Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

09/08/2020

Reference Date:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ , 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED
in 1 BOTTLE

NDC: 49702-0231-13

Document Type:

INVOICE

109/08/2020

 Lot Number
 Quantity
 Unique Serial #

 PL3D
 2

 VW6H
 1

 PG9F
 2

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC 5901 W	Name: OLYMPIA PLAZA PHARMACY INC 5901 W
Address: OLYMPIC BLVD STE 103	Address: OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 09/08/20 01S29942002	Date Received & Ref : 09/08/20 01S29942002
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 KD2R
 1

 X46V
 1

 V59A
 1

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/29/20 PO#160125 Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave

Rame: StainRx
Address: 807 Stanley Ave
Address: 807 Stanley Ave

Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: 08/10/20 PO#1SN3510 Date Received & Ref: 08/10/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 08/21/20 PO#01A2802

Brooklyn, NY 11235

Date Received & Ref: 08/21/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 09/02/20 PO#01209608 | Date Received & Ref: 09/02/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 Po#9268 Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

09/08/2020

Reference Date:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01l32561

NDC: 49702-0231-13 Document Type: INVOICE

Lot Number	Quantity	Unique Serial #
KD2R	1	
X46V	1	
V59A	1	

Reference Date: 09/08/2020

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/08/20 01S29942002	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/08/20 01S29942002
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address: Date Purchased & Ref :	SHIPPED TO: Name: Address: Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

01132561 in 1 BOTTLE **Reference Number:**

INVOICE **Document Type:** NDC: 49702-0231-13

Lot Number Quantity **Unique Serial #** WE7K 1 SE9Y 1

09/08/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: ViiV Healthcare

Manufacturer's informationFive Moore Drive, Research Triangle Park, North Carolina 27709-3398

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/23/20 07/23/20 PO#160098

SOLD TO: SHIPPED TO:

Name: StainRx StainRx Name: 807 Stanley Ave Address: Address: 807 Stanley Ave Brooklyn, NY 11207 Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3508 08/07/20 Date Received & Ref: 08/07/20

SOLD TO: SHIPPED TO:

Name:

BNR Wholesaler Name: **BNR Wholesaler** Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235 Brooklyn, NY 11235

Date Purchased & Ref: Date Received & Ref: 08/25/20 08/25/20 PO#01A2828

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 09/02/20 09/02/20 PO#01209608

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 09/08/20 09/08/20 PO#9268

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

TRIUMEQ, 600; 50; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED

in 1 BOTTLE Reference Number: 01I32561

NDC: 49702-0231-13 Document Type: INVOICE

Lot Number	Quantity	Unique Serial #
WE7K	1	
SE9Y	1	

Reference Date: 09/08/2020

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036
Date Purchased & Ref : 09/08/20 01S29942002	Date Received & Ref : 09/08/20 01S29942002
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT, 200; 25; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC

01132561 **Reference Number:**

INVOICE **Document Type:** NDC: 61958-2101-01

Lot Number Quantity **Unique Serial #** 020236 2 020236 2

09/08/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information wheeler ave LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street Address:

Sun Prairie, WI 53590

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/24/20 07/24/20 PO#160103

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

PO#1SN3517 08/13/20

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 08/13/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

Name:

Address:

SHIPPED TO:

BNR Wholesaler 3858 Nostrand Ave

Brooklyn, NY 11235

Date Received & Ref: 08/20/20 08/20/20 PO#01A2798

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

Date Purchased & Ref: 09/02/20 PO#01209608 SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 09/02/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/08/20 PO#9268 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/08/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

Reference Date:

09/08/2020

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ODEFSEY TAB 30CT, 200; 25; 25 mg/1; mg/1; mg/1, TABLET, 30 TABLET in 1 BOTTLE, PLASTIC Reference Number: 01I32561

NDC: 61958-2101-01 Document Type: INVOICE

 Lot Number
 Quantity
 Unique Serial #

 020236
 2

 020235
 2

(TH) Transaction History (Cont.)

SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC 5901 W Address: OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/08/20 01S29942002
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :
SHIPPED TO: Name: Address: Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT, 600; 200; 300 mg/1; mg/1; mg/1, TABLET, FILM COATED, 30 TABLET, FILM COATED in 1 BOTTLE, PLA

01132431 Reference Number:

Reference Date:

09/04/20

Invoice NDC: 15584-0101-01 **Document Type:**

Lot Number Quantity **Unique Serial #** 016332

(TH) Transaction History

Manufacturer's Name: GILEAD SCIENCES

Manufacturer's information 800 WHEELER AVENUE LA VERNE, CA 91750

SOLD TO: SHIPPED TO: Name: INDEPENDENT PHARMACY COOPERATIVE

INDEPENDENT PHARMACY COOPERATIVE Address: 1500 COLUMBUS STREET Address: 1500 COLUMBUS STREET

SUN PRAIRIE, WI 53590 SUN PRAIRIE, WI 53590

PO#159652 Date Purchased & Ref 5/6/20 PO#159652 Date Purchased & Ref: 5/6/20

SOLD TO: SHIPPED TO: Name: **STAINRX** Name: STAINRX

Address: 807 STANLEY AVENUE Address: 807 STANLEY AVENUE BROOKLYN, NY 11207 BROOKLYN, NY 11207

PO#1SN3315 PO#1SN3315 Date Purchased & Ref 5/18/20 Date Purchased & Ref: 5/18/20

SOLD TO: SHIPPED TO:

Name: **BNR WHOLESALER BNR WHOLESALER** Name: Address: 3858 NOSTRAND AVENUE Address: 3858 NOSTRAND AVENUE

BROOKLYN, NY 11235 BROOKLYN, NY 11235

Date Purchased & Ref: 05/22/20 Date Purchased & Ref: 05/22/20 PO#01A2566 01S30114001

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: Address: 9229 QUEENS BLVD Address: 9229 QUEENS BLVD **REGO PARK NY 11374 REGO PARK NY 11374**

PO#01208268 PO#01208268 Date Purchased & Ref 06/08/20 Date Purchased & Ref 5/27/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC SAFE CHAIN SOLUTIONS Name: Address: 822 CHESAPEAKE DR Address: 822 CHESAPEAKE DR

CAMBRIDGE MD 21613 CAMBRIDGE MD 21613

Date Purchased & Ref: 07/31/20 PO#01209513 Date Received & Ref: 07/31/20 RC#013890

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 1 pages.

Drug Supply Chain Security Act Document Doc#00000015544

(TI) Transaction Information

	gth, Dosage Form 30CT, 600; 200; 3		BLET, FILM COATED, 30 TABLET		n 1 BOTTL	E, PL
			Reference Number:	01132431		
NDC: 15584-0101	1-01		Document Type:	Invoice		
Lot Number	Quantity	Unique Serial #	Reference Date:	09/04/20	_	
016332	1					

(TH) Transaction History (Continued)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/04/20 01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/04/20 01S30114001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA TAB 30CT

NDC: 15584-0101-01

Lot Number Quantity **Unique Serial #** 1 015850

01132431 Reference Number:

Document Type:

INVOICE 07/31/2020

Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 1800 WHEELER AVENUE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative** Name: Independent Pharmacy Cooperative

1550 Columbus Street 1550 Columbus Street Address: Address: Sun Prairie, WI 53590 Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 05/11/20 05/01/20 PO#159632

SOLD TO: SHIPPED TO:

Name:

LMP Pharmacy LMP Pharmacy Name: 7535 Main Str Address: Address: 7535 Main Str Flushing, NY 11367 Flushing, NY 11367

Date Purchased & Ref: PO#5248 05/26/20 Date Received & Ref: 05/26/20

SOLD TO: SHIPPED TO:

Name: **BNR Wholesaler BNR Wholesaler** Name: Address: Address: 3858 Nostrand Ave 3858 Nostrand Ave Brooklyn, NY 11235

Brooklyn, NY 11235 Date Purchased & Ref: 06/05/20 06/05/20 Date Received & Ref: PO#01A2608

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11 Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

06/10/20 Date Received & Ref: 06/24/20 Date Purchased & Ref: PO#01208543

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR** Address: **822 CHESAPEAKE DR CAMBRIDGE MD 21613 CAMBRIDGE MD 21613**

Date Purchased & Ref: Date Received & Ref: 07/31/20 07/31/20 PO#9134

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

of 2 Page: 1 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Stren ATRIPLA TAB 300	• •	n, Container Size:			
			Reference Number:	01132431	
NDC: 15584-0101-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	07/31/2020	
015850	1				

(TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref: 09/04/20 01830114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref: 09/04/20 01S30114001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref: 06/05/20 PO#01A2608	Date Received & Ref: 06/05/20
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial #** 19GV022UA

Reference Number: 01132431

INVOICE **Document Type:** 09/01/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SHIPPED TO: SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street Address:

Sun Prairie, WI 53590

08/03/20

Name:

Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/23/20 07/23/20 PO#160098

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

PO#1SN3490 07/28/20

SHIPPED TO:

StainRx Name: 807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 07/28/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

PO#01A2759

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave

Brooklyn, NY 11235

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Purchased & Ref: 08/06/20

PO#01209190

SHIPPED TO:

Date Received & Ref:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 REGO PARK, NY 11374

08/03/20

Date Received & Ref: 08/06/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

of 2 Page: 1 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng	th, Dosage Form,	Container Size:			
GENVOYA TAB 300	CT		Reference Number:	01 32431	
NDC: 61958-1901-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
19GV022UA	1				
]		

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial # CCXCVA**

Reference Number: 01132431

Document Type: Reference Date:

INVOICE 09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO:

Name: **Independent Pharmacy Cooperative**

1550 Columbus Street Address:

Sun Prairie, WI 53590

SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Received & Ref: Date Purchased & Ref: 07/17/20 07/17/20 PO#160079

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref: PO#1SN3485 07/24/20

SHIPPED TO:

StainRx Name: 807 Stanley Ave

Address: Brooklyn, NY 11207

Date Received & Ref: 07/24/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

SHIPPED TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Received & Ref: 08/04/20 08/04/20 PO#01A2763

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: Date Purchased & Ref: 08/06/20 08/06/20 PO#01209190

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582; (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strei	ngth, Dosage Form	n, Container Size:		
GENVOYA TAB 3	0СТ		Reference Number:	01 32431
NDC: 61958-1901-0 ⁻	1		Document Type:	INVOICE
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020
CCXCVA	1			

(TH) Transaction History

SOLD TO:	SHIPPED TO:
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103
LOS ANGELES CA 90036	LOS ANGELES CA 90036
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO:	SHIPPED TO:
Name:	Name:
Address:	Address:
Date Purchased & Ref :	Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial #** 020717 1

Reference Number: 01132431

Document Type: Reference Date:

INVOICE

09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO:

Independent Pharmacy Cooperative

Name: Address:

1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/09/20 SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address: Sun Prairie, WI 53590

Date Received & Ref: 07/09/20

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave

Brooklyn, NY 11207

Date Purchased & Ref:

07/29/20

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 07/29/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

PO#01A2759

PO#160048

PO#1SN3492

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 08/03/20

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

Date Purchased & Ref: 08/05/20

08/03/20

SHIPPED TO:

Name: Address:

BOULEVARD 9229 LLC 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374

Date Received & Ref: 08/05/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582; (D) did not knowingly ship a suspect or illegitimate product;

PO#01209165

- (E) had systems and processes in place to comply with verification requirements under section 582; (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng	gth, Dosage Form, C	ontainer Size:			
GENVOYA TAB 30CT NDC: 61958-1901-01			Reference Number:	01 32431	
			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
020717	1				

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:		
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC		
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103		
LOS ANGELES CA 90036	LOS ANGELES CA 90036		
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

GENVOYA TAB 30CT

NDC: 61958-1901-01

Lot Number Quantity **Unique Serial #** 19GV020UA

Reference Number: 01132431

Document Type: Reference Date:

INVOICE

09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO:

Independent Pharmacy Cooperative

Name: Address:

1550 Columbus Street

Sun Prairie, WI 53590

Date Purchased & Ref: 07/10/20 PO#160052

07/21/20

07/30/20

SHIPPED TO:

Name: Independent Pharmacy Cooperative

1550 Columbus Street Address:

Sun Prairie, WI 53590

Date Received & Ref: 07/10/20

SOLD TO:

Name: StainRx

Address: 807 Stanley Ave Brooklyn, NY 11207

Date Purchased & Ref:

PO#1SN3478

PO#01A2752

PO#01209134

SHIPPED TO:

StainRx Name:

807 Stanley Ave Address:

Brooklyn, NY 11207

Date Received & Ref: 07/21/20

SOLD TO:

Name: **BNR Wholesaler**

Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref:

SHIPPED TO:

Name: **BNR Wholesaler** Address:

3858 Nostrand Ave Brooklyn, NY 11235

Date Received & Ref: 07/30/20

SOLD TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 **REGO PARK, NY 11374**

Date Purchased & Ref: 08/04/20 SHIPPED TO:

Name: **BOULEVARD 9229 LLC** Address:

9229 QUEENS BLVD STE 11 REGO PARK, NY 11374

Date Received & Ref: 08/04/20

SOLD TO:

Name: SAFE CHAIN SOLUTIONS, LLC

Address: **822 CHESAPEAKE DR**

CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Address:

822 CHESAPEAKE DR

CAMBRIDGE MD 21613

Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act; (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Page: 1 of 2 pages.

Drug Supply Chain Security Act Document

(TI) Transaction Information

, ,	th, Dosage Form, Co	ontainer Size:			
GENVOYA TAB 30CT			Reference Number:	01l32431	
NDC: 61958-1901-01			Document Type:	INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
19GV020UA	1				

(TH) Transaction History (Cont.)

SOLD TO:	SHIPPED TO:		
Name: OLYMPIA PLAZA PHARMACY INC	Name: OLYMPIA PLAZA PHARMACY INC		
Address:5901 W OLYMPIC BLVD STE 103	Address 5901 W OLYMPIC BLVD STE 103		
LOS ANGELES CA 90036	LOS ANGELES CA 90036		
Date Purchased & Ref : 9/4/20 01S30114001	Date Received & Ref: 9/4/20 01S30114001		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		
SOLD TO:	SHIPPED TO:		
Name:	Name:		
Address:	Address:		
Date Purchased & Ref :	Date Received & Ref :		

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

HARVONI TAB 90/400MG 28CT

NDC: 61958-1801-01

 Lot Number
 Quantity
 Unique Serial #

 012062
 1

 015550
 1

Reference Number: 01l32499

Document Type: INVOICE
Reference Date: 09/01/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information1800 WHEELER AVE LA VERNE, CA 91750

SOLD TO: SHIPPED TO:

Name: Independent Pharmacy Cooperative Name: Independent Pharmacy Cooperative

Address: 1550 Columbus Street Sun Prairie, WI 53590 Address: 1550 Columbus Street Sun Prairie, WI 53590

Date Purchased & Ref: 07/13/20 PO#160057 Date Received & Ref: 07/13/20

SOLD TO: SHIPPED TO:

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Name: StainRx
Address: 807 Stanley Ave
Brooklyn, NY 11207

Date Purchased & Ref: 07/23/20 PO#1SN3483 Date Received & Ref: 07/23/20

SOLD TO: SHIPPED TO:

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Name: BNR Wholesaler
Address: 3858 Nostrand Ave

Brooklyn, NY 11235

Date Purchased & Ref: 07/29/20 PO#01A2744

Date Received & Ref: 07/29/20

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE 11

REGO PARK, NY 11374 REGO PARK, NY 11374

Date Purchased & Ref: 08/06/20 PO#01209190 | Date Received & Ref: 08/06/20

SOLD TO: SHIPPED TO:

Name: SAFE CHAIN SOLUTIONS, LLC Name: SAFE CHAIN SOLUTIONS, LLC

Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613 Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613

Date Purchased & Ref: 09/01/20 PO#9255 Date Received & Ref: 09/01/20

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

(C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;

(D) did not knowingly ship a suspect or illegitimate product;

(E) had systems and processes in place to comply with verification requirements under section 582;

(F) did not knowingly provide false transaction information; and

(G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Streng HARVONI TAB 90/ NDC: 61958-1801-01		n, Container Size:	Reference Number: _ Document Type: _	01l32499 INVOICE	
Lot Number	Quantity	Unique Serial #	Reference Date:	09/01/2020	
012062	1				
015550	1				

(TH) Transaction History (Cont.)

SOLD TO: Name: SYNERGEN RX LLC Address: 3990 FLOWERS RD. STE 530 DORAVILLE, GA 30360 Date Purchased & Ref: 9/8/20 01S30198001	SHIPPED TO: Name: SYNERGEN RX LLC Address: 3990 FLOWERS RD. STE 530 DORAVILLE, GA 30360 Date Purchased & Ref: 9/8/20 01S30198001
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :
SOLD TO: Name: Address:	SHIPPED TO: Name: Address:
Date Purchased & Ref :	Date Received & Ref :

- (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) (G)
- (A) is authorized as required under the Drug Supply Chain Security Act;
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- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
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- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.